Deputy C.S. Alves of the Minister for Health and Social Services regarding the prioritisation of Covid-19 tests (OQ.289/2020):

Will the Minister advise whether and how COVID-19 tests are prioritised and, if any such priority system is in operation, will he state whether the tests of inbound travellers to the Island are being prioritised over the tests of any symptomatic Island resident?

The Deputy of St. Ouen (The Minister for Health and Social Services):

P.C.R. (polymerase chain reaction) tests for COVID-19 are taken with the aim of identifying all new cases and preventing the spread of the virus. I have got quite a raft of information but the question focuses on the priorities between symptomatic Island residents and inbound travellers. We use 4 different laboratories for our tests; one is the on-Island hospital laboratory which has an average one to 2-hour turnaround time, and that is used to test hospital admissions and symptomatic hospital patients. The on-Island COVID laboratory which is sited at the Aero Club has an average of 8 to 12-hour turnaround time, and for the moment that is testing all day zero tests from inbound travellers. The off-Island private laboratory, Micropathology, has an average 29-hour turnaround time and it is to that laboratory that most symptomatic community cases who are already in isolation are sent. So that is the primary use of each of the laboratories. We would want and aim in a short while to ensure that our laboratory at the Aero Club is able to conduct all the tests that are needed in the Island.

4.13.1 Deputy C.S. Alves:

The Minister mentioned 3 labs I think, not 4. When does the Minister see that the lab at the Aero Club will be able to process more of these tests, and can the Minister also clarify which lab is currently processing day 5 tests, as I have been hearing from a significant number of residents and travellers who are waiting for their 5-day test and it is taking up to 48 hours, which is resulting in them having to isolate up to 7 days instead of 5 as initially thought.

The Deputy of St. Ouen:

Yes, I did not mention the fourth laboratory which is off-Island and is run by Public Health England and has an average 35-hour turnaround time, and that is used only at the moment for workforce screening tests, which is why I did not mention it first. So the 5 and 8-day tests are, in the main, conducted off-Island with Micropathology, which has an average of 29-hour turnaround time, but they are primarily used for the day 5 and day 8 tests for direct contacts and the day 5 tests for green and amber arrivals and, as I said earlier, for symptomatic community cases who are already in isolation. We would hope to be able to conduct all these tests within a matter of weeks. I think it is a careful graduation of the on-Island testing facility so the report I had is perhaps a week old but all was going well with the process, and I think I can say within a matter of weeks that we hope to have all Island testing.

4.13.2 Deputy R.J. Ward:

Part of my question was answered in the previous answer but does the Minister understand the importance - particularly as you mentioned earlier there may be on-Island transmission occurring - that quick turnaround tests will be vital as part of the test and trace process that gives us the opportunity to suppress the virus even on-Island.

The Deputy of St. Ouen:

Yes, that is recognised and of course suppression means that we require people to isolate. It is the fact they are isolating which means that the virus is limited in its spread. The use of the laboratories I have mentioned is the primary use of each laboratory; where appropriate we can be flexible and if a case warrants it then the on-Island laboratories will be used where there is capacity.

4.13.3 Deputy R.J. Ward:

Does the Minister accept that the balance between isolation and then receiving a test and therefore being able to carry on with lives, which is the key to us having some sort of continuation here, that will be assisted by quick turnaround testing from tracing processes and from those who are receiving a second test? So, therefore, it is a double priority, i.e. people can get their test quickly and then continue with their lives if they are hopefully negative.

The Deputy of St. Ouen:

Yes, I would accept that we have always sought to achieve as quick a turnaround as we can and that is one of the reasons for the substantial investment in the on-Island laboratory, which will meet all our needs very quickly.

4.13.4 Senator K.L. Moore:

I would be grateful if the Minister would confirm the current maximum number of tests that can be processed at the on-Island testing facility at the moment. If the Minister could also confirm, when he describes that he hopes a greater variety of tests will be able to be processed on that site, is that due to the decreasing numbers arriving or an increasing ability to test per day, and if so what will then be the number of tests he expects the laboratory will be able to process per day.

The Deputy of St. Ouen:

The laboratory will be able to process up to 2,000 tests each day, which we anticipate will be sufficient for most of our needs, though we still wish to retain the option of the off-Island facilities and we will be ensuring that that continues. The notes I have anticipate that this new functionality will be available within the next month, that is November. We are certainly operating the on-Island test laboratory at over 1,000 tests at the moment, working towards that 2,000 figure.

[11:15]

4.13.5 Deputy L.M.C. Perchard:

Just on the original concept of the priority, why is it that day 5 tests of children who are sent home to isolate from schools are not considered to be suitable for the on-Island facility rather than being sent away?

The Deputy of St. Ouen:

They are suitable to be conducted on the on-Island facility; I think it has thus far been a question of capacity because the greater risk of spread on the Island has been coming from inbound travellers, though as I have said that is perhaps beginning to shift. But with that greater risk it is important that the on-Island testing facility is able to rapidly test all day zero incoming passengers, and that is what it has been doing. Where there has been spare capacity other tests have been taken but until the on-Island laboratory has reached its 2,000 a day capacity we are using Micropathology with the average 29-hour turnaround time for those day 5 tests.

4.13.6 Deputy L.M.C. Perchard:

Does the Minister not think that in the case of an outbreak in a community such as a school where obviously young children are expected to isolate, would he not consider that those are urgent enough to warrant the second test being done more quickly?

The Deputy of St. Ouen:

That may be the case. These decisions on prioritisation do not come up to ministerial level and I would not be the right person to assess and graduate risk. So what I have been describing is the primary use of each laboratory but of course officers are able to in a situation like a school infection to ensure that those tests are conducted by a laboratory on-Island, for example, where there is capacity and capacity may well be made. So the system is flexible enough to meet needs.

4.13.7 Deputy C.S. Alves:

Would the Minister consider taking the comments that have been raised during this question back to his officers, especially around children and workforce, because I have seen comments, for example, about one particular individual that worked for the emergency services and was in contact with a positive case and still took 34 hours to get their result back. So I would appreciate it if the Minister could take this back to his officers and ask them maybe to reconsider how they prioritise certain tests.

The Deputy of St. Ouen:

Yes, I will undertake to do that. I do not think we have discussed workforce at any great length so may I ask the Deputy to email me with the details of the workforce case that she has just mentioned if she wants us to look into that or similar situations.